NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.		<u></u>
Dan Coats for Indiana			1 1 1 1 1 1 1 1	
ADDRESS (number and street)	P.O. Box 301141		<u> </u>	
Check if different than previously reported, (ACC)	Indianapolis		J [N] [462	230
2. FEC IDENTIFICATION NO	JMBER ▼CIT		STATE AMENDED	ZIP CODE A STATE ▼ DISTRICT
	REPO		(A)	IN COO
4. TYPE OF REPORT (Choose (a) Quarterly Reports: April 15 Quarterly Report July 15 Quarterly Report	Report (Q1)	y PRE-Election Report for t Primary (12P) Convention (12C)	he: General (126) Special (128)	Provide and
েন্ (ুুুুুুু October 15 Quarte	1y Report (Q3) Electi	on on		in the State of
January 31 Year-End	nd Report (YE) (c) 30-Day	y POST-Election Report for General (30G)	the:	Special (30S)
Termination Report				in the State of
5. Covering Period MVM / DVD / YVYVY through MVM / DVD / YVYVY through 06 30 / 2014				
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Douglas Long				
Signature of Treasurer Dou	glas Long Dosalas	P. Lay	Date 07	07 2014
NOTE: Submission of false, erron Office	eous, or incomplete information	n may subject the person sig	ning this Report to the	penalties of 2 U.S.C. §437g.

FEC FORM 3

(Revised 02/2003)

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Use

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